

**MINUTES ~ November 2, 2016**  
**Community Support Network Partner Meeting**

3:30 to 5:00 pm ~ Gene Albaugh Community Room at the Madelyn Helling Library

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**Attending CSN Partners** – 23 attended (6 filled out evaluation forms) including Barb Smith, Adult Family Services Commission; Cassie Davidson Rodriguez, Friendship Club and WSMC; Cindy Wilson, Nevada County Public Health Dept.; Dena Valin, Friendship Club; Frank McClain, Transforming Our Culture of Violence/DVSAC; Helen Williamson, NAMI/Nevada County Mental Health Board; Jill Blake, Nevada County Public Health Department; Jolene Hardin, AFLP - Cal-Learn; Kayla Day, Sierra Forever Families; Laura Harter, DVSAC; Lindsay Dunckel, First 5 Nevada County; Lourdes Vose, SNCS; Mary DeWitt, Community Member; Maureen Gerecke, FREED; Meg Luce, PARTNERS/NCSOS; Megan Murphy, VCSS; Michelle Montgomery, DVSAC; Ned Russell, Got 40?, CSN-CAPC Board; Rosnina Dort, Child Care Coordinating Council; Sue Fry Van Rheenen, Sierra Forever Families; Sylvia Pichitino, Sierra Forever Families; Trevina George, NS-PA; Susan Sanford, CSN Coordinator.

**Welcome & Introductions** – Rosnina Dort, MA ECE, LPC|EQ Coordinator, Child Care Coordinating Council and CSN-CAPC Board

**CSN Documents** – Accepted minutes from October meeting; accepted updates to CSN Agreements & Guidelines document.

**40 Developmental Assets** – Ned Russell of Got 40?

Core Principle of 40 Assets – Recognizing/Complimenting Strengths (details on last page of minutes)

**Meeting Focus**

*"Community Health Improvement Plan (CHIP) – Where We've Been and Where We're Going."* Presenter Jill Blake, Public Health Director, Nevada County Public Health Department. The June 2015 meeting of the Community Support Network served as one of the public meetings for providing input to the overall Community Health Assessment process (a precursor to the final CHIP). This meeting provided an update on what's happened since then and what's next.

A link to Community Health Assessment (CHA) document is on this web page:

<https://www.mynevadacounty.com/nc/hhsa/ph/Pages/2016-Community-Health-Assessment.aspx>

The following info is from Jill Blake's PowerPoint presentation.

The process of Community Health Improvement Planning engages the community to address important public health issues with the desired result of creating broad-based, effective strategies implemented through strong community partnerships.

Jill's presentation was in three parts:

- I. The path the community has traveled over the past two years to create the CHIP
- II. The vision, goals, objectives and strategies developed in partnership with the community
- III. The remaining steps in the process

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CSN Vision Statement

All families in Nevada County have ready access to a well-integrated and coordinated support network that is easily available and well funded.

*Community Support Network of Nevada County ~ [www.csnn.org](http://www.csnn.org)*

*Contact ~ CSN Coordinator - [csnnorg@gmail.com](mailto:csnnorg@gmail.com) - 530-913-0270 (messages)*

## **I. The path the community has traveled over the past two years to create the CHIP**

In 2015, the Nevada County Public Health Department convened a steering committee of about 20 people to guide a Community Health Improvement Plan (CHIP) using a modified Mobilizing for Action through Planning and Partnerships (MAPP) process. A key component of the planning process is community engagement. The steering committee represented a broad cross-section Nevada County's organizations, agencies, and institutions. Events to invite additional participation from community members took place in February and August 2016. Social Entrepreneurs Inc. facilitated this process with the steering committee, working through visioning, assessments, strategic issues, goals and strategies. MAPP has many steps – and results in a defensible plan that considers public health from many different perspectives.

The Steering Committee looked at health from various perspectives prescribed by MAPP:

- Forces of Change (What is occurring that will affect the local public health system or community?)
- Community Themes & Strengths (What is important to our community? What assets do we have? What are perceptions about quality of life?)
- Community Health Status (What does our health status look like? How healthy are our community members?)
- The Local Public Health System (What are the activities, and competencies, and capacities of our local public health system?)

The CHA gathered and synthesized information from many sources, including publicly available data, reports, community surveys, and focus groups in order to identify the priority issues to address in the CHIP. The CHA described both health needs and assets in Nevada County. It also addressed the social determinants of health (SDOH). The CHA differs from the Public Health Department's regular health status report. The health status report is more of a data report and the CHA has social aspects too.

Community meetings were held to address these questions: What issues are critical to the success of the local public health system? What fundamental policy choices or critical challenges must be addressed in order for the community to achieve its vision?

The five main issues identified by the community are: affordable housing, chronic disease, mental health, substance abuse, and access to health care.

## **II. The vision, goals, objectives and strategies developed in partnership with the community**

**Our Vision: A vibrant, diverse, connected, and healthy community.**

The information and data gathered were used to develop strategic issues, and from there, goals, objectives, and strategies. The goals are in the arenas of Healthy Lifestyles, Behavioral Health, and Socio-Economics. The community identified 38 strategies and the CHIP Steering Committee identified 8 of those to begin working on in the first year of the plan.

*Here are the 8 strategies.*

1. Promote, leverage and expand community partnerships, to provide access to healthy food, nutrition education, and WIC/SNAP benefits; address policies and ordinances that promote healthy lifestyles; and, create a full circle of opportunities for developing healthy habits.
2. Provide community and youth education about smoking and about vaping.

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3. Establish/expand Friendly Visitor program for seniors. (This program pairs homebound seniors with a visitor, and can also include therapy animals).
4. Explore and implement evidence-based strategies for prevention--including strategies of the Drug-Free Coalitions--to reduce youth easy access to alcohol and drugs, as appropriate.
5. Offer more positive alternatives for kids, e.g.: Youth Center.
6. Work with partners to develop a pilot for integrated healthcare (mental, oral, physical and substance use).
7. Expand/increase partnerships with the Planning Department for housing and to expand resources and supports/supportive services.
8. Promote babies' early health and nutrition outcomes.

### **III. The remaining steps in the process**

#### **Current status**

- Working to finalize indicators (measures to track and monitor plan implementation and change).
- Steering Committee will review the plan until 11/18.

#### **What's next**

- Looking for partners to help implement strategies.
- Final edits will be incorporated into draft plan.
- CHIP to be issued December 2016.

### **From Q&A**

- Entered the discussion of the steering committee, but not in the top 5 priorities:
  - ~ ramifications of possible legalization of marijuana
  - ~ healthy use of social media
  - ~ meeting health needs at jail
  - ~ public health issues involving people who are homeless
- Housing – overwhelming need and a huge task
- CHIP is a living document – lots of flexibility and willingness to change
- Public Health Department's strategic plan may address things the CHIP does not
- Local public health is an ecosystem with many parts: community members, law enforcement, health care, schools, faith community, nonprofits, government
- The CHIP project was undertaken to learn what a “gold standard” health department looks like. A key aspect is engaging the community in public health.
- Each strategy needs to have ways to assess baseline and measures of success. Want to align local ones with existing state and national indicators and processes.
- This is a five year plan, so it will need to be revised every 5 years.
- Public health department will be the data collection point for collaborations.
- An attendee recommended a film called “The Human Experiment” about chemicals in the environment, and suggested public banking as a possible means of funding for community endeavors.

### **Contact Info**

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**Building the Network** – CSN shared info about some local holiday services for kids and families.

**Network Announcements and Meeting Evaluation**

- Cassie Davidson Rodriguez – This Saturday – The Friendship Club will be doing a spaghetti feed from 5-8pm at Grass Valley Vet’s Hall downstairs – tickets available several places including from TFC. Cassie is also Youth Outreach Coordinator at Western Sierra Medical Clinic - wants to partner with other organizations – her focus is on prevention.
- Frank McClain – Transforming Our Culture of Violence - 6-week seminar starting in January
- Jolene Hardin – Young Parents Program –please refer young parents who could benefit from the services – 530-272-2635 x338, jhardin@njuhsd.com
- Michelle Montgomery – in January DVSAC will be hosting a Green Dot bystander training – registration is open now – training teaches people how to direct, distract, and delegate

**Adjournment** – Hiatus for December. Next meeting: January 4, 2017, Gene Albaugh Community Room, at the Madelyn Helling Library.

***2016 CSN Partner Meeting Dates ~ January 6, February 3, March 2, April 6, May 4, June 1, July & August-hiatus, September 7, October 5, November 2, December-hiatus***

***2017 CSN Partner Meeting Dates ~ January 4, February 1, March 1, April 5, May 3, June 7, July & August-hiatus, September 6, October 4, November 1, December-hiatus***

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## **Community Support Network of Nevada County Meeting Agreements**

- Make decisions by consensus.
- Create an atmosphere of mutual respect that includes active listening and listening without judging.
- Start and end on time.
- Maintain a sense of humor and a positive attitude.
- Bring concerns to the whole group. Don't take them to the parking lot after the meeting.
- Set up the room in an inclusive way.
- Take responsibility for a task only if you have the time to accomplish it.
- Everyone is empowered to be a process observer and take ownership for the health of the meeting and is responsible for the health of the whole meeting.
- Be sensitive to others' need for more information. Make sure everyone understands.
- Be careful of injecting your self-interest and label it as such. Be able to layout your agency's interest and be open to other's interests.
- Meetings are meaningful and have a shared purpose.
- This is a living document and can be changed as needed.

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### **Core Principle of 40 Assets – Recognizing/Complimenting Strengths – November 2, 2016**

Focusing on a person's strengths instead of his/her problems helps build assets 1-5, 7, 8, 14, 20, 26, 30, 33, 34, 37, 38, and 39. Focusing includes first noticing, then indicating you have noticed by words or body language, such as a nod, smile, etc.

From the 10/24/16 Bolster Collaborative e-newsletter: author Margery Sharp quoting Miss Bianca, her mouse character in *The Rescuers*: "Moreover, people told they are generous and open-minded often discover that they really are, so flattery of the right kind... does nothing but good." And unattributed: "Watch for those golden opportunities to catch someone at their best. It can change the course."

To learn more about the 40 Developmental Assets (Got40?), call 530-271-5617 or email [info@Got40.org](mailto:info@Got40.org) or [NedRussell@pacbell.net](mailto:NedRussell@pacbell.net).

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